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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)								
	Sean Eldridge (b) Address (number and street)	☐ Check if address changed				2. Candidate's FEC Identification Number			
	PO Box 660	□ Check if address changed			H4NY19115				
	(c) City, State, and ZIP Code					New	Amended		
	Shokan		N	/ 1248			(N) OR	(A)	
4.	Party Affiliation	5. Office Soug	ht			rict of Candidate			
	DEMOCRATIC PARTY	House			NY	19			
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE									
7.	. I hereby designate the following named political committee as my Principal Campaign Committee for the 2014 (year of election)								
	NOTE: This designation should be filed with the appropriate office listed in the instructions.								
	(a) Name of Committee (in full)								
Sean Eldridge for Congress									
	(b) Address (number and street)								
	PO Box 4113								
	(c) City, State, and ZIP Code								
	Kingston				NY	12402			
DESIGNATION OF OTHER AUTHORIZED COMMITTEES									
(Including Joint Fundraising Representatives)									
8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.									
NOTE: This designation should be filed with the principal campaign committee.									
(a) Name of Committee (in full)									
Hudson Valley Victory Fund									
	(b) Address (number and street) 410 1st Street SE								
	Suite 310								
	(c) City, State, and ZIP Code								
	Washington				DC	20003			
	vvaoriingtori					20000			
	I certify that I have exa	mined this Stat	ement and to	the best of	my knowledge a	nd belief it is true, correc	ct and comple	te.	
Signature of Candidate Date									
Se	ean Eldridge			(FI.	4	02/27/2014			
				[Elec	tronically Filed]	02,2.720			
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.									
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FEC FORM 2 (REV. 02/2009)